

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF CHRISTIAN J. BRACKO	COURT CASE NUMBER 08-239 JL
DEFENDANT ALEX CAINE	TYPE OF PROCESS Summons Complaint Answer

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**SERVE** { City of San Pablo, California  
**AT** ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
One Alvarado Square, 13831 San Pablo Avenue, San Pablo, CA 94806

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Mister Phillips LAW OFFICE OF MISTER PHILLIPS P.O. Box 1162 Pinole, CA 94564	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

 RECEIVED  
UNITED STATES MARSHAL  
FEB 12 PM 1:49  
FEB 11 AM 1:15  
2008  
NORTHERN DISTRICT OF CALIFORNIA  
FEB 11 AM 1:15  
2008

Signature of Attorney other Originator requesting service on behalf of:  GLORIA ACEVEDO	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER 415-522-3080
	<input type="checkbox"/> DEFENDANT	DATE 2/9/08

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk <i>R. Lopez</i>	Date 2/11/08
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I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)  LEHNY CORBIN, DEPUTY CITY CLERK	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode		
Address (complete only different than shown above)	Date 2/12/08	Time 0920	<input checked="" type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>R. Lopez</i>		

Service Fee 845.00	Total Mileage Charges including endeavors 8.25	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

PRINT 5 COPIES: 1. CLERK OF THE COURT  
2. USMS RECORD  
3. NOTICE OF SERVICE  
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.  
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED